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VIA FACSIMILE NO.: 571-273-8300

File No.: SWA01 P-107

DATE: November 2, 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: WILLIAMS, L. LLOYD
Filed: December 21, 2005
Serial No.: 10/036,998
Title: METHOD FOR VENDING AND DELIVERING
TELEPHONE SERVICES
Examiner: James H. Zurita
Group Art Unit: 3625
Attorney Docket No.: SWA01 P-107
Customer No.: 28101

Commissioner for Patents
United States Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450 U.S.A.

Dear Sir:

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following papers are being facsimile transmitted to the Patent and Trademark Office on the date shown below:

1. Amendment (23 pages)
2. Claims as Amended form (1 page, in duplicate)
3. Annotated drawing sheets showing changes (2 pages)
4. Replacement drawing sheets (2 pages)

YOU SHOULD RECEIVE A TOTAL OF THIRTY (30) PAGES.

Dated: November 2, 2005.

FSB:djr
SWA01 P-107
Enc.

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2851 Charlevoix Drive, S.E., Suite 207
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Grand Rapids, Michigan 49588-8695
616/988-4108

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : L. Lloyd Williams
 Serial No. : 10/036,998
 Filed : December 21, 2001
 For : METHOD FOR VENDING AND DELIVERING TELEPHONE SERVICES

Group Art Unit : 3625
 Examiner : James H. Zurita
 Conf. No. : 5702

Commissioner for Patents
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 Alexandria, VA 22313-1450

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Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than a Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	* 16	Minus	** 32	= 0	x \$ 25	\$ -	x \$ 50	\$ 0
Independent Claims	* 1	Minus	*** 3	= 0	x \$100	\$ -	x \$200	\$ 0
First Presentation of Multiple Dependent Claims \$180						\$ -	x \$360	\$ 0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ -		\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

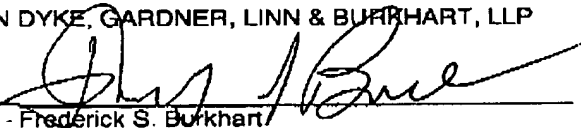
The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- Small entity status of this application 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.
- ☒ No additional fee is required.
- A check in the amount of \$_____ is attached.
- ☒ Please charge any fees due to Deposit Account No. 22-0190. A duplicate of this sheet is attached.

VAN DYKE, GARDNER, LINN & BURKHART, LLP

Dated: November 2, 2005.

By:


 Frederick S. Burkhardt
 Registration No. 29 288
 P.O. Box 888695
 Grand Rapids, Michigan 49588-8695
 (616) 988-4104

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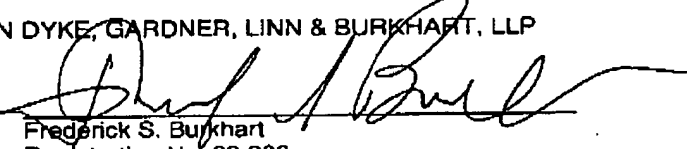
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Alexandria, VA 22313-1450 U.S.A.

Dear Sir:

AMENDMENT

In response to the Office Action dated August 3, 2005, please amend the above-identified patent application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 13 of this paper.

Amendments to the Drawings begin on page 17 of this paper.

Remarks/Arguments begin on page 18 of this paper.

Appendix A, including (a) drawing replacement sheet(s) and drawing annotated sheet(s), is attached hereto.